

PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Stephen R. Lawrence

Examiner: Ella Colbert

Serial No: 09/684,947

Art Unit: 3624

Filed: October 6, 2000

Docket: 11379A

For: META SEARCH ENGINE

Dated: March 4, 2003

#7/B
3/7/03

Assistant Commissioner for Patents
United States Patent and Trademark Office
Washington, D.C. 20231

AMENDMENT PURSUANT TO 37 C.F.R. §1.111

Sir:

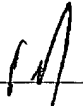
In response to the Official Action dated December 4, 2002, the Applicant respectfully requests the Examiner to amend the above-identified application as follows and solicits the Examiner to reconsider the application in view of the amendment and the following remarks.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Dated: March 4, 2003
Evelyn Guishard

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 11379A	
Applicant(s): STEPHEN R. LAWRENCE					
Serial No. 09/684,947	Filing Date October 6, 2000	Examiner Ella Colbert		Group Art Unit 3624	
Invention: META SEARCH ENGINE					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	1 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="margin-top: 10px;"><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1013 SSMP A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div>					
<div style="text-align: center;"> _____ Signature</div> <div>Paul J. Esatto, Jr. Registration No. 30,749 Scully, Scott, Murphy & Presser 400 Garden City Plaza New York, NY 11530</div>			Dated: March 4, 2003		
<div style="float: right; text-align: right;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.</div> <div style="clear: both;"></div> <div style="text-align: center; margin-top: 10px;">_____ Signature of Person Mailing Correspondence</div> <div style="text-align: center; margin-top: 10px;">_____ Typed or Printed Name of Person Mailing Correspondence</div>					
cc:					

P11LARGE/REV06